MAY 09 2006 10:09AM SCOTT

> RECEIVED **CENTRAL FAX CENTER**

PART B - FEE(S) TRANSMITTAL

Alexandria, Virginia 22313-1450

MAY 0 9 2006

Complete and send this form, together with applicable fee(s), to: Mail Stop ISSUE FEE

Commissioner for Patenta (703) 746-4000 or Fax

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 4 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications.

CURRENT CORRESPONDENCE ADDRESS (NOTE: Legibly mark-up with any corrections or use Block 1)			Note: A certificate of mailing can only be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawings, must have its own certificate of meiling or transmission. Certificate of Mailing or Transmission I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO, on the date indicated below.					
Scott P. Zimmerman, P.O. Box 3822 Cary, NC 27519								
			Seoft Zimm	erma			(Depositor's name)	
						7	(Signature)	
			May 9,	2006		1000	(Date)	
APPLICATION NO.	FILING DATE	FIRST NAMED	INVENTOR	1	ATTORNEY DOC	KET NO.	CONFIRMATION NO.	
10/084,948 TITLE OF INVENTION: SYSTE	03/01/2002 M AND METHOD FOR A W	Charles B. D EB-BASED APPLICATION D	ougherty EVELOPMENT AND D	EPLOY	BS01396 MENT TRACKIN		8286	
APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION I	ÆE	TOTAL FE	E(S) DUE	DATE DUE	
Nonprovisional	NO	\$1400	\$300	\$300 \$1		709	06/14/2006	
EXAMINER		ART UNIT	CLASS-SUI					
KENDALL, CHUCK O	KENDALL, CHUCK O 2192			717-170000				
☐ Change of correspondence address (or Change of Correspondence Address to PTO/SB/122) attached. ☐ "Fee Address" Indication (or "Fee Address" Indication form PTO/SB/47; Rev 03 or more recent) attached. Use of a Customer Number is required.			attorneys of agents OH, attendatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed. 3. Todd Mit				& ZIMMERMAN arson Medlin em	
3. ASSIGNEE NAME AND RES PLEASE NOTE: Unless an as previously submitted to the USF (A) NAME OF ASSIGNEE BELLSOUTH INTELLECTUAL	signee is identified below, r TO or is being submitted un PROPERTY CORPORATION	to assignee data will appear on the complete cover. Complete on the cover of the co	on the palent. Included ion of this form is NOT (B) RESIDENCE: (C) 824 MARKET STRE	ET	d STATE OR CO	UNTRY)		
Please check the appropriate assignee category or categories (will not be printed on the patent);						required fee(s), or credit any extra copy of this form).		
(Authorized Signature):	JAN ((Date):	onne			o ao mo appro-		
NOTE: The Issue Age and Pur registered attorney or agent; or Patent and Trademark Office.					33/11/2006 V	IABDELR3 9 0	1884948	
This collection of information is by the public which is to file (ar 122 and 37 CFR 1.14. This collection and submitting the completed of Any comments on the amount should be sent to the Chief Info Alexandria, Vriginia 22313-14: TO: Commissioner of Patents Under the Paperwork Reduction unless it displays a valid OMB	nd by the USPTO to process altertion is estimated to take application form to the USP of time you require to comp ormation Officer, U.S. Paten 50. DO NOT SEND FEES 3, Alexandria, Virginia 2231 an Act of 1995, no persons a	a) an application. Confidential 12 minutes to complete, inclusion. TO. Time will sury depending lete this form and/or suggestic to and Trademark Office, U.S. I OR COMPLETED FORMS TO 3-1450	ity is governed by 35 u ding gathering, prepari upon the individual ca ins for reducing this bu Department of Comme of THIS ADDRESS. SE	ng, se. rden, rce,	01 FC:1501 02 FC:1504 03 FC:8001		1400.00 0 300.00 0 9.00 0	